05/20/2010 19:11

Image# 10930756496

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Massachusetts Republican State Congressional Committee 85 Merrimac Street, Suite 400 ADDRESS (number and street) Check if different than previously **Boston** MA 02114 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00042622 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 04 0 1 2010 04 3 0 2010 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Brent Andersen Type or Print Name of Treasurer Electronically Filed by Brent Andersen 05 20 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

### SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) OF RECEIPTS AND DISBURSEMENTS 2 / 48

Report Covering the Period: From:	0 4 0 1 Y Y Y Y Y Y T	o: 0 4 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand  January 1 2010 Y		80412.05
(b) Cash on Hand at Begining of Reporting Period	335183.36	
(c) Total Receipts (from Line 19)	120323.98	1384079.38
(d) Subtotal (add lines 6(b) and		
6(c) for Column A and Lines 6(a) and 6(c) for Column B)	455507.34	1464491.43
7. Total Disbursements (from Line 31)	90147.82	1099131.91
Cash on Hand at Close of     Reporting Period     (subtract Line 7 from Line 6(d))	365359.52	365359.52
Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	. 5660.20	
This Committee has qualified as a mu	icandidate committee. (see FEC FORM 1M)	

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE OF RECEIPTS**

3 / 48 FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

М М 0 1 м°м 0 4 30 2010 2010 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 107750.00 436509.00 (i) Itemized (use Schedule A) ...... 12018.98 78509.38 (ii) Unitemized ..... (iii) TOTAL (add 119768.98 515018.38 Lines 11(a)(i) and (ii) ...... 55.00 55.00 (b) Political Party Committees ..... Other Political Committees 500.00 21400.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 120323.98 536473.38 Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other 847606.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00

120323.98

120323.98

1384079.38

1384079.38

(c) Total Transfer (add 18(a) and 18(b)).

12, 13, 14, 15, 16, 17, and 18(c)) ......

(subtract Line 18(c) from Line 19) .....

19. Total Receipts (add Lines 11(d),

20. Total Federal Receipts

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 48

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures	64072.22	363846.04
	(c) Total Operating Expenditures	0.4070.00	000040.04
	(add 21(a)(i), (a)(ii) and (b))	64072.22	363846.04
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	0.00	0.00
	Independent Expenditure		
	(use Schedule E)	0.00	0.00
25.	Coordinated Expenditures Made by Party		077000 50
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	677026.52
		0.00	0.00
6.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other	0.00	0.00
	Than Political Committees		
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
0	Federal Election Activity (2 U.S.C 431(20))		
υ.	(a) Shared Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(1) 1 343741 371413		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	20077.00	
	With Federal Funds	26075.60	58259.35
	(c) Total Federal Election Activity (add	26075.60	58259.35
	Lines 30(a)(i), 30(a)(ii) and 30(b))	20073.00	36239.33
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	90147.82	1099131.91
	Total Federal Disbursements		
32.			
32.	(subtract Line 21(a)(ii) and Line 30(a)(ii)	90147.82	1099131.91

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 48

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	120323.98	536473.38
4.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	120323.98	536473.38
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	64072.22	363846.04
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88.	Net Operating Expenditures (subtract Line 37 from Line 36)	64072.22	363846.04

FE6AN026

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 48 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
A	ny information copied from such Reports and r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Massachusetts Republican State Cor	ngressional C	committee	
	Full Name (Last, First, Middle Initial) G.L. Alcock			Date of Receipt
	Mailing Address 105 Cherry Brook Ro	ad		04 09 2010
	City	State	Zip Code	Transaction ID: 00420.C181043
	Weston	MA	02493	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self Employed	Occupation Venture	n Investing and mgt.	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Denise Bankston			Date of Receipt
	Mailing Address 19 Wentworth Dr.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 00420.C180907
	Beverly	MA	01915	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Information Requested	Occupation Informat	n ion Requested	Receipt
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	500.00	
	Full Name (Last, First, Middle Initial) Timothy Barton			Date of Receipt
	Mailing Address 48 Carpenter St			04 23 7 2010
	City	State	Zip Code	Transaction ID: 00520.C181502
	Manchester	NH	03104	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		3000.00
	Name of Employer Information Requested	Occupation Informat	n ion Requested	Receipt
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	7
	Other (specify) ▼	0 0	3000.00	1
	SUBTOTAL of Receipts This Page (optional)			4000.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 48 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Massachusetts Republican State Con	gressional C	Committee	
Α.	Full Name (Last, First, Middle Initial) Robert Beal			Date of Receipt
	Mailing Address 177 Milk Street DO NOT MAIL			04 21 2010
	City	State	Zip Code	Transaction ID: 00520.C181316
	Boston	MA	02109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10000.00
	Name of Employer The Beal Companies	Occupation real esta		Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 10000.00	
ь. В.	Full Name (Last, First, Middle Initial) Emmitt Brewingtn			Date of Receipt
	Mailing Address 76 Green Rd			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: 00420.C181068
	Bolton	MA	01740	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Information Requested		ion Requested	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 200.00	
C.	Full Name (Last, First, Middle Initial) John Brock			Date of Receipt
	Mailing Address 25 Windy Ridge Pkwy	′		0 4 2 7 2 0 1 0
	City	State	Zip Code	Transaction ID: 00520.C181846
	Atlanta	GA	30339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10000.00
	Name of Employer Coca Cola	Occupation Executiv	е	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 10000.00	
	SUBTOTAL of Receipts This Page (optional) .	•		20200.00
ļ	TOTAL This Period (last page this line numbe		<u> </u>	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 48 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by any per name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Massachusetts Republican State Co	ngressional Committee	
	Full Name (Last, First, Middle Initial) Gould Coleman		Date of Receipt
	Mailing Address 81 Bickford Hill Rd		04 13 2010
	City	State Zip Code	Transaction ID: 00420.C181163
	Gardner	MA 01440	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Retired	Occupation Retired	Receipt
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	
_	Full Name (Last, First, Middle Initial) Arthur Dantchik	<u> </u>	Date of Receipt
	Mailing Address 206 Maple Hill Rd		04 / 09 / 4 2010
	City	State Zip Code	Transaction ID: 00420.C181041
	Gladwyne	PA 19035	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10000.00
	Name of Employer SIG LLP	Occupation Trader	Receipt
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 10000.00	
_	Full Name (Last, First, Middle Initial) Paul Edgerley		Date of Receipt
	Mailing Address 119 Hyslop Road		0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 00420.C180961
	Brookline	MA 02445	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	-5000.00
	Name of Employer Bain Capital	Occupation Venture Capital	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ -5000.00	
Γ	NIPTOTAL of December This Daws (antique)		5100.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 48 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any personant the name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Co	ongressional Committee	
Full Name (Last, First, Middle Initial) Paul Edgerley Mailing Address 119 Hyslop Road		Date of Receipt
City Brookline	State Zip Code MA 02445	0 4   0 7   2 0 1 0
FEC ID number of contributing federal political committee.	C	15000.00
Name of Employer Bain Capital	Occupation Venture Capital	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	
Full Name (Last, First, Middle Initial) Grace Fey Mailing Address 6 Commonwealth A	venue	Date of Receipt
Apt. 3	State Zip Code	0 4 2 9 2 0 1 0 Transaction ID: 00520.C182203
Boston	MA 02116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer Frontier Capital Manageme- nt	Occupation Investment Manager	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Mark Gaboury		Date of Receipt
Mailing Address 212 Mount Hope St		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City North Attleboro	State Zip Code MA 02760-3908	Transaction ID: 00520.C181501  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUPTOTAL of Possints This Page (entions	l)	20500.00

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 48 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commerci	copied from such Reports and S ial purposes, other than using the COMMITTEE (In Full) setts Republican State Conc	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	_ast, First, Middle Initial)	Jiessionai G		
Frank Granal Mailing Add	ra			Date of Receipt    M
City Norwell		State MA	Zip Code 02061	Transaction ID: 00420.C181059  Amount of Each Receipt this Period
FEC ID num	nber of contributing cal committee.	C		500.00
Name of Em GIC	nployer	Occupatio Presiden		Receipt
Receipt For: Primar Other		Aggregate	e Year-to-Date ▼ 500.00	
Full Name (I John Hansen Mailing Addr		<u> </u>		Date of Receipt
City		State	Zip Code	0 4 3 0 2 0 1 0 Transaction ID: 00520.C182233
Westfield		MA	01085	Amount of Each Receipt this Period
federal politi	nber of contributing cal committee.	С		100.00 Receipt
Name of Em Information			ion Requested	Ποσορί
Receipt For: Primar Other		Aggregate	e Year-to-Date ▼	
Full Name (I Michael Host	_ast, First, Middle Initial)			Date of Receipt
Mailing Add	ress 109 Main St			04 20 2010
City <u>Southboro</u>	ough	State MA	Zip Code 01772	Transaction ID: 00520.C181314  Amount of Each Receipt this Period
federal politi	nber of contributing cal committee.	C		500.00
Name of Em Retired	ployer	Occupatio Retired	n	Receipt
Receipt For: Primal Other		Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of	f Receipts This Page (optional)			1100.00
TOTAL This F	Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 48 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Massachusetts Republican State Cong	e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Virginia Kaneb  Mailing Address 34 Masconomo Street  City  Manchester  FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For:  Primary General Other (specify)	State Zip Code MA 01944  C  Occupation At home  Aggregate Year-to-Date   15000.00	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Bob Kaufman Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify)	State Zip Code  C  Occupation Information Requested  Aggregate Year-to-Date  250.00	Date of Receipt  M M M D D D Y Y Y Y Y Y  O 4 D D D Y Y Y Y Y  Transaction ID: 00420.C181057  Amount of Each Receipt this Period  250.00  Receipt
Full Name (Last, First, Middle Initial) Brian Kavoogian Mailing Address 66 Fiske Road  City Wellesley Hills  FEC ID number of contributing federal political committee.  Name of Employer Charles River Realty Investors  Receipt For:  Primary General Other (specify)	State Zip Code MA 02181  C  Occupation President  Aggregate Year-to-Date  10000.00	Date of Receipt  M M M O 9 2 0 1 0  Transaction ID: 00420.C181029  Amount of Each Receipt this Period  10000.00  Receipt
SUBTOTAL of Receipts This Page (optional)		25250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 48 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Massachusetts Republican State Cor	Statements may not be sold or used by any pers le name and address of any political committee to agressional Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) James Knott  Mailing Address 456 Hill Street  City Whitinsville  FEC ID number of contributing federal political committee.  Name of Employer Riverdale Mills Corporation Receipt For: Primary General Other (specify)	State Zip Code MA 01588  C  Occupation President  Aggregate Year-to-Date   1000.00	Date of Receipt  M M M O 9 2 0 1 0  Transaction ID: 00420.C181082  Amount of Each Receipt this Period  1000.00  Receipt
Full Name (Last, First, Middle Initial) Drew Leff Mailing Address 112 Beach St  City Boston  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify)	State Zip Code MA 02111  C  Occupation Consultant  Aggregate Year-to-Date  200.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Angelo Marciano Mailing Address 27 Lakeshore Ave  City Beverly  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify)	State Zip Code MA 01915  C  Occupation Information Requested Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1450.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 48 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  Massachusetts Republican State Co	I Statements may not be sold or used by any personal committee to engressional Committee	
Full Name (Last, First, Middle Initial) Jim Mcmanus  Mailing Address 88 Chestnut St  City Weston  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify)	State Zip Code MA 02493  C  Occupation Information Requested  Aggregate Year-to-Date   500.00	Date of Receipt  M M M O 9
Full Name (Last, First, Middle Initial) Ann Murphy  Mailing Address 65 Helen Street  City Waltham  FEC ID number of contributing federal political committee.  Name of Employer GPC/ONeill & Assoc.  Receipt For: Primary General Other (specify)	State Zip Code MA 02452  C  Occupation Vice President, PR Consultant  Aggregate Year-to-Date  250.00	Date of Receipt  M M O G O G O C O C O C O C O C O C O C O C
Full Name (Last, First, Middle Initial) Robert Reynolds  Mailing Address 153 Garfield Road  City Concord  FEC ID number of contributing federal political committee.  Name of Employer Putnam Investments  Receipt For: Primary General Other (specify)	State Zip Code MA 01742  C  Occupation Chairman & CEO  Aggregate Year-to-Date   10000.00	Date of Receipt  M M M O 2 2 1 1 0  Transaction ID: 00420.C180696  Amount of Each Receipt this Period  10000.00  Receipt
SUBTOTAL of Receipts This Page (optional)		10750.00

SCHEDULE A (FEC Form STEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 48 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than us	and Statements may not be sold or used by any personing the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  Massachusetts Republican State	Congressional Committee	
Full Name (Last, First, Middle Initial)  A. Michael Robbins		Date of Receipt
Mailing Address 105 Colchester S 2009 KC MEMBE	ER!!!	04 14 2010
City Brookline	State Zip Code MA 02446	Transaction ID: 00420.C181220  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Advest Company	Occupation Investments	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Charles Rounds		Date of Receipt
Mailing Address 107 Mount Verno	on St.	0 4
City	State Zip Code	Transaction ID: 00420.C180886
<u>Boston</u>	MA 02108	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  200.00	
Full Name (Last, First, Middle Initial)  C. Richard Warren Russell		Date of Receipt
Mailing Address PO Box 638		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 00520.C181595
Dover  FEC ID number of contributing federal political committee.	MA 02030	Amount of Each Receipt this Period  1000.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	onal)	2200.00
	umber only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each	parate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 15 / 48 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and address of any	d or used by any perso political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	Massachusetts Republican State Con	gressional Committee		
A.	Full Name (Last, First, Middle Initial) Stephen Sherrill			Date of Receipt
	Mailing Address 765 Park Ave			04 / 09 / Y Y Y Y Y Y Y
	City New York	State Zip Co NY 10021		Transaction ID: 00420.C181052  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		5000.00
	Name of Employer Information Requested	Occupation Information Reque	ested	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da	5000.00	
- В.	Full Name (Last, First, Middle Initial) Kevin Shield	l		Date of Receipt
	Mailing Address 11 Winslow Rd			04 23 2010
	Chalmafard	State Zip Co		Transaction ID: 00520.C181504
	Chelmsford  FEC ID number of contributing federal political committee.	MA 01824		Amount of Each Receipt this Period  1400.00
	Name of Employer Information Requested	Occupation Information Reque	ested	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da	1400.00	
С. С.	Full Name (Last, First, Middle Initial) John Sivolella			Date of Receipt
	Mailing Address 85 Monadnock Rd.			0 4 2 1 2 0 1 0
	City	State Zip Co		Transaction ID: 00520.C181318
	Wellesley FEC ID number of contributing federal political committee.	MA 02481	1 1 1	Amount of Each Receipt this Period  9000.00
	Name of Employer Columbia University	Occupation Academic		Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da	9000.00	
	SUBTOTAL of Receipts This Page (optional)			15400.00
T	TOTAL This Period (last page this line number	only)	·······························	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the led Summary Page	FOR LINE NUMBER: PAGE 16 / 48 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  Massachusetts Republican State (In Full)	g the name and address of a	any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Gordon Taylor  Mailing Address 439 South Shelbur	ne Rd.		Date of Receipt
City Shelburne FEC ID number of contributing	State Zip MA 013	Code 870	Transaction ID: 00520.C182227  Amount of Each Receipt this Period
Receipt For:  Primary  Other (specify)   General	Occupation Indep. Ins. Agen Aggregate Year-to-		Receipt 100.00
Full Name (Last, First, Middle Initial)  Mark Thomas  Mailing Address 495 Hugh Cargill F		Code	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Concord  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For:  Primary General	Occupation Information Requal Aggregate Year-to-	uested	Amount of Each Receipt this Period  500.00  Receipt
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Jacques Wajsfelner  Mailing Address 298 Concord Rd.	0 0 0		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Weston FEC ID number of contributing federal political committee.	State Zip MA 024	Code 193	Transaction ID: 00420.C180698  Amount of Each Receipt this Period  1000.00
Name of Employer Retired  Receipt For:  Primary General  Other (specify) ▼	Occupation Retired Aggregate Year-to-	Date ▼ 1000.00	Receipt
SUBTOTAL of Receipts This Page (option	al)		1600.00

COLLEDIN E A /EEO Esses OV)				FOR LINE NUMBER: PAGE 17 / 48								
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)		(check only one)							$\exists$	
			for each category of the Detailed Summary Page	X	11a 13		11b   14	11	` <b>⊢</b>	12 16	1°	7
Any information copied or for commercial purp	d from such Reports and Sta poses, other than using the r	atements may name and add	y not be sold or used by any persodress of any political committee to	on for the	e purp contrib	ose utio	of solic	iting o	contrib	outions nittee.		
NAME OF COMM	ITTEE (In Full)											
Massachusetts	Republican State Congr	essional C	ommittee									
Full Name (Last, F Henry Weaver	irst, Middle Initial)			D	ate of	Red	ceipt					
Mailing Address	37 Baskin Rd.				м м 0 4	′	02	′ [		2 0 1 0		
City		State	Zip Code	Tr	ansac	tio	n ID: 0	0420	.C18	0720		
Lexington		MA	02421	Α	mount	of	Each R	eceip	this F	eriod		
FEC ID number of federal political cor		С						-	2	200.00	1	
Name of Employer Retired		Occupation Retired	n	— ке	eceipt							
Receipt For: Primary Other (specif	General	Aggregate	Year-to-Date ▼ 200.00	1								

SUBTOTAL of Receipts This Page (optional)	•	200.00
TOTAL This Period (last page this line number only)	<u> </u>	107750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 48 (check only one)  11a 11b X 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
$\rangle$	NAME OF COMMITTEE (In Full) Massachusetts Republican State Congr	ressional C	ommittee	
	Full Name (Last, First, Middle Initial) Committee to Elect Brad Jones  Mailing Address 249 Park St.			Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 00420.C180695
	North Reading	MA	01864	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Candidate Committee	Occupation OCPF ID		- Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	500.00
TOTAL This Period (last page this line number only)	<b>•</b>	500.00

_			FOR LINE NUMBER: PAGE 19 / 48							
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	11a X 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and Statements ma for commercial purposes, other than using the name and ac									
$\overline{\ }$	NAME OF COMMITTEE (In Full)									
$\rangle$	Massachusetts Republican State Congressional C	Committee								
	Full Name (Last, First, Middle Initial) Vasilika Tsucalas		Date of Receipt							
	Mailing Address 67 High Street Apt. #2		04 06 7 2010							
	City State	Zip Code	Transaction ID: 00420.C180870							
	<u>Everett</u> MA	02149	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.		55.00							
	Name of Employer Occupation	on	Receipt							
	Receipt For: Aggregat	te Year-to-Date ▼	7							
	Primary General Other (specify)	55.00								

SUBTOTAL of Receipts This Page (optional)	•	55.00
TOTAL This Period (last page this line number only)	<u> </u>	55.00

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congress	ional Committee		
Full Name (Last, First, Middle Initial) Barrows Barrows Insurance			Transaction ID: 00520.E12099 Date of Disbursement
Mailing Address 215 North Main Street			$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} & / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{bmatrix} & / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} \end{bmatrix}$
,	State Zip Code MA 02048-		Amount of Each Disbursement this Period
Purpose of Disbursement Liability Insurance	[	•	2005.12
Candidate Name	-	Category/ Type	
Senate President	ment For: Primary General Other (specify)		LIABILITY INSURANCE
State: District: Full Name (Last, First, Middle Initial)			
American Express			Transaction ID: 00520.E12138  Date of Disbursement
Mailing Address PO Box 1270			$ \begin{bmatrix} M & M \\ 0 & 4 \end{bmatrix} \begin{bmatrix} D & D & B \\ 0 & 8 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
•	State Zip Code NJ 07101-1270		Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card: See below			1014.90
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		CREDIT CARD: SEE BELOW
State: District: Full Name (Last, First, Middle Initial)			Tunned in IR 00500 540445
Boston Beer Works			Transaction ID: 00520.E12145 Date of Disbursement
Mailing Address			$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
City	State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement amex - staf lunch	I	• •	212.51
Candidate Name		Category/	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Туре	[MEMO ITEM] MEMO: AMEX - STAF LUNCH
State: District:			
SUBTOTAL of Disbursements This Page (optional) .			3020.02

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			E NUMBER: PAGE 21 / 48 nly one)									
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 <u> </u>	1b [	22 28a	23 28b	24 28c	$\vdash$	25 29	26 30b				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		y any pe	rson f	or the pu	rpose of s	oliciting co	ontribu	tions	1 200				
NAME OF COMMITTEE (In Full)													
Massachusetts Republican State Congress	sional Committee												
Full Name (Last, First, Middle Initial)				Trans	action ID	: 00520	.E120	)95					
SCM Associates					of Disburs				_				
Mailing Address Steve Meyers 1283 Main Street				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$									
City Dublin	State Zip Code NH 03444-			Amou	int of Each	Disburse			eriod				
Purpose of Disbursement Direct Mail	Γ						153	3.71					
Candidate Name		Category Type	//										
Office Sought:    House   Disburse     Senate   President     State: District:	ment For: Primary General Other (specify)			DIRE	CT MAIL								
Full Name (Last, First, Middle Initial)						00500							
Scr & Associates, LLC				Date o	of Disburs	ement			V				
Mailing Address 4 Leblanc Dr				0 <sup>M</sup> 4	M / B C	8 /	2 0	1 0	Ť				
City Danvers	State Zip Code MA 01923-			Amou	int of Each	Disburse	ment t	his P	eriod				
Purpose of Disbursement Fundraising consulting fee-party related non FEA							6000	0.00					
Candidate Name		Category Type	//										
Senate President	ment For: Primary General Other (specify)			FUND E-PAI	RAISINO RTY REL	G CONS ATED N	ULTII ION F	NG F EA	E-				
State: District: Full Name (Last, First, Middle Initial)													
Insurance Barrows				Date o	of Disburs	ement							
Mailing Address 215 North Main St.				0 <sup>M</sup> 4	M / D	1 /	ž 0	10	Y				
City Mansfield	State Zip Code MA 02048-			Amou	int of Each	Disburse	ment t	his P	eriod				
Purpose of Disbursement Insurance							260	0.00					
Candidate Name		Category Type	//										
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼			INSUI	RANCE								
State: District:	·												
SUBTOTAL of Disbursements This Page (optional)			<u> </u>				6413	3.71					

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		R LINE	E NUMBER:	РА	GE 22/	48				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	21b 27	22 2	23 24 28b 28c	25 29	26 30b				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name											
NAME OF COMMITTEE (In Full)											
Massachusetts Republican State Congress	sional Committee										
Full Name (Last, First, Middle Initial) BFSdaniels BFSdaniels				Transaction Date of Disk	n ID: 00520	.E12090	)				
Mailing Address											
City	State Zip Code			Amount of E	Each Disburse	ment this	Period				
Purpose of Disbursement	1			-		191.2	5				
printing											
Candidate Name		Catego	,								
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)			PRINTING	i						
State: District:	] (op), •										
Full Name (Last, First, Middle Initial)				Transaction	n ID: 00520	.E12105	;				
BFSdaniels BFSdaniels				Date of Dist			_				
Mailing Address				04	0 8 / Y	ž 0 1	0 \				
City	State Zip Code			Amount of E	Each Disburse	ment this	Period				
Purpose of Disbursement printing		•				819.1	9				
Candidate Name		Catego	-								
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)			PRINTING	i						
State: District:											
Full Name (Last, First, Middle Initial) BFSdaniels BFSdaniels				Transaction Date of Dist	<b>n ID:</b> 00520 bursement	.E12118	1				
Mailing Address				04	28 / Y	<sup>y</sup> 2 0 1	0 <sup>Y</sup>				
City	State Zip Code			Amount of E	Each Disburse	ment this	Period				
Purpose of Disbursement printing				191.25							
Candidate Name		Catego									
Office Sought: House Disburse Senate President	ement For:  Primary General  Other (specify)	,,,		PRINTING	i						
State: District:	States (opeonly)										
SUBTOTAL of Disbursements This Page (optional)		<u></u>	<u> </u>			1201.6	9				

В.

C.

SCHEDULE B (FEC Form 3X)	Has assessed a decidad N	FOR LINE	E NUMBER: PAGE 23 / 48					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	/ one)					
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b					
Any Information copied from such Reports and Staten	nents may not be sold or used by							
or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
/ Massachusetts Republican State Congres	sional Committee							
Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Massachusetts			Transaction ID: 00520.E12102 Date of Disbursement					
Mailing Address Landmark Center 401 Park Drive			04					
City Boston	State Zip Code MA 02215-		Amount of Each Disbursement this Period					
Purpose of Disbursement Health Insurance	Г	•	1470.31					
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		HEALTH INSURANCE					
Full Name (Last, First, Middle Initial)			Transaction ID: 00520.E12109					
Byte Bulb			Date of Disbursement					
Mailing Address The Trimount Company, 75 Meadowbrook RD.								
City Hanover	State Zip Code MA 02339-		Amount of Each Disbursement this Period					
Purpose of Disbursement pary related website development		•	110.00					
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		PARY RELATED WEBSITE DEVELOPMENT					
Full Name (Last, First, Middle Initial)			Transaction ID: 00520.E12103					
Css Castle Self-Storage			Date of Disbursement					
Mailing Address 39 Old Colony Ave.			$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$					
City Boston	State Zip Code MA 02127-		Amount of Each Disbursement this Period					
Purpose of Disbursement	T <sub>F</sub>	• •	69.09					
storage Candidate Name		Category/ Type						
Senate President	ement For: Primary General Other (specify)	. 750	STORAGE					
State: District:								
SUBTOTAL of Disbursements This Page (optional)		······ <u>}</u>	1649.40					

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 24 / 48
TEMIZED DISBURSEMENTS	for each category of the	(check only	☐ 22 ☐ 23 ☐	24 25 26
	Detailed Summary Page	27		28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
/ Massachusetts Republican State Congress	ional Committee			
Full Name (Last, First, Middle Initial) DCU Center			Transaction ID: 00 Date of Disbursemer	
Mailing Address 50 Foster Street			$\begin{bmatrix} 0 & 4 & 4 & 4 \end{bmatrix}$	Y 2010 Y
•	State Zip Code MA 01608-		Amount of Each Disk	oursement this Period
Purpose of Disbursement				91.01
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	,,		
State: District:	Care (openity)			
Full Name (Last, First, Middle Initial)			Transaction ID: 00	)520.E12096
Kauppi Communications			Date of Disbursemer	
Mailing Address 27 Townly Road			04 01	Y ŽOŽOŠ
•	State Zip Code MA 02472-		Amount of Each Disk	oursement this Period
Watertown Purpose of Disbursement	IVIA 02472-			3000.00
communications consulting fee				
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)		COMMUNICATION FEE	NS CONSULTING
State: District:				
Full Name (Last, First, Middle Initial) Kauppi Communications			Transaction ID: 00 Date of Disbursemen	
Mailing Address 27 Townly Road			$\begin{bmatrix} 0 & 4 & 0 & 0 \\ 0 & 4 & 0 & 0 \end{bmatrix}$	<sup>'</sup> 2010 <sup>'</sup>
•	State Zip Code MA 02472-		Amount of Each Disk	oursement this Period
Purpose of Disbursement	1VIA 02472-			3000.00
communications consulting fee				
Candidate Name		Category/ Type		
Office Sought: House Disburse	ment For:	Турс	001444444	
Senate President	Primary General Other (specify) ▼		COMMUNICATION FEE	NS CONSULTING
State: District:	_ 5.0. (apoon) / ▼			
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>		6091.01

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		-	R LINE NUMBER: PAGE 25 / 48 eck only one)							48		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28	2	23 28b	, [	24 28c		25 29	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			ny persor	n for the	pui	rpose of	so	liciting c		outions			
NAME OF COMMITTEE (In Full)													
Massachusetts Republican State Congress	ional Committee												
Full Name (Last, First, Middle Initial)				Tra	Transaction ID: 00520.E12101								
FLS Connect				Da	Date of Disbursement								
Mailing Address 7300 Hudson Blvd. Ste				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$									
•	State Zip Code MN 55128-			An	noui	nt of Ea	ch	Disburse	emen	t this f	Period		
Purpose of Disbursement				7 L					17	42.00	)		
party related telemarketing fundraising													
Candidate Name			tegory/ Гуре										
Senate President	ment For: Primary General Other (specify) ▼			PARTY RELATED TELEMARKET ING FUNDRAISING							ET-		
Full Name (Last, First, Middle Initial) Nick Connors					_	action I of Disbu	rse		).E1	2137			
Mailing Address 74 Green Street				0 4 M / 0 8 / Y 2 0 1 0 Y						) <sup>Y</sup>			
,	State Zip Code MA 02180-			An	noui	nt of Ea	ch	Disburse	emen	t this f	Period		
Purpose of Disbursement Reimbursement parkingfoodtravelcell phone				7 L					11	67.98	3		
Candidate Name			tegory/ Type										
Senate President	ment For: Primary General Other (specify)			RE TR	IMI AV	BURSE ELCEL	EM L	ENT PA	ARK	INGF	OOD-		
State: District:													
Full Name (Last, First, Middle Initial) Nick Connors						action I of Disbu		00520 ment	).E1	2132			
Mailing Address 74 Green Street				O	4	M / [	0	8 /	Ž	0 ť (	) <sup>Y</sup>		
	State Zip Code MA 02180-			An	noui	nt of Ea	ch	Disburse	-				
Purpose of Disbursement			• • •	T L					11	33.73	3		
reimbursement see below Candidate Name			tegory/										
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼	Т	Гуре	RE	IMI	BURSE	ΞM	ENT SI	EE E	BELO	W		
State: District:	· 												
SUBTOTAL of Disbursements This Page (optional) .			▶						404	43.71			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s		FOR LINI (check on	E NUMBER	:		PA	GE 26/	48
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 -	X 21b 27	22 23 28a 28b			24 28c	25 29	
Any Information copied from such Reports and State									
r for commercial purposes, other than using the nam	ne and address of any politica	u comr	nittee to s	olicit contrib	utions tr	om s	sucn co	ommittee	
NAME OF COMMITTEE (In Full)	-:! 0:								
Massachusetts Republican State Congres	sional Committee								
Full Name (Last, First, Middle Initial)				Tranca	ction ID	. ^	0520	E12133	,
Webconnex Webconnex					Disburs	eme			
Mailing Address				0 4	_ C	8	L	2 0 1	0
City	State Zip Code			Amount	t of Each	Dis	burser	nent this	Period
Purpose of Disbursement				1 L.				1133.7	3
nick Connors reimbursement for internet svc for e	vent								
Candidate Name			tegory/ ype	IMENAC	\ ITER#	ı			
Office Sought: House Disburs	ement For:			[MEMC			NNOF	RS REIN	/IRI I-
Senate	Primary General			RSEME FOR E	ENT FC	ŘΊ	NTER	NET S	/C
President State: District:	Other (specify)			FURE	V ⊏IN I				
Full Name (Last, First, Middle Initial)  Keswick Consulting					ction ID: Disburs	_		E12104	
Reswick Consulting				_ Date of	_		/ Y	Y Y	Υ
Mailing Address 231 Victory Road				0 4	ا ا ا	8		ž 0 1	0
City	State Zip Code			Amount	of Each	Dis	burser	nent this	Period
Quincy	MA 02171-				•			2000 0	^
Purpose of Disbursement Political consulting fee- party related non FEA								3000.0	Ų
Candidate Name			tegory/ ype						
Office Sought:    House   Disburs	ement For:    Primary   General     Other (specify)   \(\psi\)		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	POLITI PARTY	CAL CO	ONS TEC	SULTI NON	ING FEI N FEA	≣-
Full Name (Last, First, Middle Initial)				Tuonas	-4: ID	. ^	0500	T10111	
DirecTV DirecTV				Date of	Disburs	eme		E12111	
Mailing Address PO Box 60036				0 4 M	/ D	5	/ LY	ž 0 1	0 <sup>Y</sup>
City	State Zip Code			Amount	of Each	Dis	burser	ment this	Period
Los Angeles	CA 90060-0036	,					-	40.0	4
Purpose of Disbursement Cable TV				L.				49.3	4
Candidate Name			tegory/						
Callulate Name			ype						
Senate President	ement For: Primary General Other (specify)	•		CABLE	TV				
State: District:									
SUBTOTAL of Disbursements This Page (optional)			•					3049.3	4
TOTAL This Period (last page this line number only	)		•						
E6AN026	<i>j</i> ······		•	FEC.	Calacid	la C	/ F==	n 3X) (Re	

SCHEDULE B (FE	-		arate schedule(s)		OR LINI	E NUMB	ER:		PA	GE 27/	48	_
TEMIZED DISBU	RSEMENTS		category of the Summary Page	X	_	22 28a	23 28b		24 28c	25 29		26
Any Information copied from												
r for commercial purposes,		name and addre	ss of any political	comm	ttee to s	olicit con	tributions 1	rom	such c	ommittee		
NAME OF COMMITTEI  Massachusetts Repu	` '	ressional Con	nmittee									
Maddadraddta Hope	ibiloan otato oong	ji oddionai odn										
Full Name (Last, First, N Tara Esfahanian	Middle Initial)					Date	saction II of Disbur	seme				
Mailing Address 17	7 Upham St.					0 4	M / D	15	/ Y	2 0 1	0 Y	
City		State	Zip Code			Amo	unt of Eac	h Dis	burser	ment this	Perio	d
Melrose		MA	02176-					-	•	2500.0	n	_
Purpose of Disbursemer Fundraising consultant f		vent		,	,			-		2300.0	Ů.	_
Candidate Name	oo for party foración of	- Cit		Cate	gory/ pe							
S	Senate President	oursement For: Primary Other (spe	General ecify) ▼			FUN FOF	DRAISIN PARTY	IG C REL	ONSI ATEC	JLTANT EVEN	FEI T	Ξ
Full Name (Last, First, N						Tron	saction II	<b>.</b> (	00520	E10107	,	_
Federal Express (Fe	,						of Disbur			E12107		
Mailing Address PC	) Box 371461					0 4	M / D	0 8	/ Y	2 0 1	0 <sup>Y</sup>	
City		State	Zip Code			Amo	unt of Eac	h Dis	sburser	ment this	Perio	d
Pittsburgh		PA	15250-				•		•	29.6	1	_
Purpose of Disbursement express mail	nt			,						29.0	!	_
Candidate Name				Cate	gory/ pe							
S	Senate President	Oursement For: Primary Other (spe	General ecify) ▼			EXP	RESS M.	AIL				
Full Name (Last, First, N Federal Express (Fe	,						saction II			E12117	,	
Mailing Address PC	) Box 371461					0 <sup>M</sup> 2	M / D	2 8 <sup>D</sup>	/ Y	ž 0 1	0 <sup>Y</sup>	
City		State	Zip Code			Amo	unt of Eac	h Dis	sburser	ment this	Perio	d
Pittsburgh		PA	15250-						•	29.0	7	_
Purpose of Disbursemer express mail	nt			,						29.0	,	_
Candidate Name				Cate	gory/ pe							
Š	Senate President	oursement For: Primary Other (spe	General ecify) ▼			EXP	RESS M	AIL				
SUBTOTAL of Disbursem	ents This Page (optic	nal)			<u> </u>					2558.6	8	
TOTAL This Deviced (Institute	ago this line number	only)							•			_
TOTAL This Period (last p	age this line number	orlly)			<u> </u>		EC Sched	-		-		_

В.

C.

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 28 / 48
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
TEMIZED DIODOTICEMENTO	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and States or for commercial purposes, other than using the name		by any person for	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
Massachusetts Republican State Congres	sional Committee		
Full Name (Last, First, Middle Initial) Kaitlyn Greeley			Transaction ID: 00520.E12148 Date of Disbursement
Mailing Address 34 Fresno St.			$\begin{bmatrix} \begin{smallmatrix} M & A & M \\ O & A & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & B \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & D \end{smallmatrix} \end{bmatrix} $
City Boston	State Zip Code MA 02131-		Amount of Each Disbursement this Period
Purpose of Disbursement reimbursement for parking food travel			243.74
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President State: District:	ement For:  Primary General  Other (specify) ▼		REIMBURSEMENT FOR PARKING FOOD TRAVEL
Full Name (Last, First, Middle Initial)			Turnes Mary ID 00500 540004
Kaitlyn Greeley			Transaction ID: 00520.E12084  Date of Disbursement
Mailing Address 34 Fresno St.			$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Boston	State Zip Code MA 02131-		Amount of Each Disbursement this Period
Purpose of Disbursement payroll			1032.33
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For:  Primary General  Other (specify) ▼		PAYROLL
State: District:			
Full Name (Last, First, Middle Initial) Guardian Guardian			Transaction ID: 00520.E12153 Date of Disbursement
Mailing Address Boston Group Office 1 Liberty Square			$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Boston	State Zip Code MA 02109-		Amount of Each Disbursement this Period
Purpose of Disbursement			129.93
Candidate Name		Category/ Type	
Senate President	ement For:  Primary General  Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			1406.00

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedu					E NUMBER: PAGE 29 / 4									
ITEMIZED DISBURSEMENTS	for each category of t Detailed Summary Pa		I -	21b 27	F	22 28a		23 28b	24 28	. [	_	25 29	$\boldsymbol{\sqcup}$	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name															
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congress	ional Committee														
Full Name (Last, First, Middle Initial) Susan Keene Mailing Address 76 Locksley Rd.						Date o		isburs	0052 ement	20.E		094 0 1 0	Y		
	State Zip Code					-	nt o			seme	ent this Period				
	MA 01940-					7							-	_	
Purpose of Disbursement accounting service Candidate Name				egory/				•		. 1	178	1.50			
Office Sought: House Senate President State: District:	ment For: Primary General Gene	eral		<del>)                                      </del>	ACCOUNTING SERVICE										
Full Name (Last, First, Middle Initial) Melissa Lucas					Transaction ID: 00520.E12112 Date of Disbursement										
Mailing Address 22 Slayton Road					0 4 M / D D / Y 2 0 1 0 Y							Y			
•	State Zip Code MA 02176-					Amou	nt o	f Each	Disbur	sem	ent	this F	erioc	t	
Purpose of Disbursement Fundraising Consulting fee for party related non FE	EA .		_		2500.00							_			
Candidate Name				egory/ ype											
Office Sought: House Disburse Senate President State: District:	ment For: Primary Gene Other (specify)	eral				FUND FOR I	RA PAF	ISINO RTY F	G CON RELAT	SUI ED	LTI NO	NG I N FI	FEE EA		
Full Name (Last, First, Middle Initial)						T		ID	0050	O F	-10	100			
Marriott burlington Marriott Burlington						Date o	of D	isburs		۷.E			14		
Mailing Address						0 <sup>M</sup> 4	М	<sup>/</sup> 1	5 /	Y	Ž (	) i 0	Y		
City	State Zip Code					Amou	nt o	f Each	Disbur	sem	ent '	this F	erioc	t	
Purpose of Disbursement GOPAC Event			_			L.				3	315	1.60			
Candidate Name		C		egory/ ype											
Office Sought: House Disburse Senate President	ment For: Primary General Gene	eral	GOPAC EVENT												
State: District:															
SUBTOTAL of Disbursements This Page (optional) .				▶						7	43	3.10			

В.

C.

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 30 / 48
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	vone)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten			
or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)	e and address of any political	committee to sol	licit contributions from such committee
Massachusetts Republican State Congress	sional Committee		
Full Name (Last, First, Middle Initial)			Transaction ID: 00520.E12155
Merchants Bankcard			Date of Disbursement
Mailing Address Fleet Bank 100 Federal Street			04
City Boston	State Zip Code MA 02110-		Amount of Each Disbursement this Period
Purpose of Disbursement			74.99
Credit card fee Candidate Name		Category/	
		Type	
Office Sought: House Disburse Senate	ement For:  Primary General		CREDIT CARD FEE
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Merchants Bankcard			Transaction ID: 00520.E12154 Date of Disbursement
Mailing Address Fleet Bank			$ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} & \begin{smallmatrix} D & D \\ & O & 1 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y \\ & 2 & O & 1 & 0 \end{smallmatrix} $
100 Federal Street			
City Boston	State Zip Code MA 02110-		Amount of Each Disbursement this Period
Purpose of Disbursement credit card fee		· · · ·	25.00
Candidate Name		Category/	
		Туре	
Office Sought: House Disburse Senate	ement For:  Primary General		CREDIT CARD FEE
President	Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: 00520.E12157
Merchants Bankcard			Date of Disbursement
Mailing Address Fleet Bank 100 Federal Street			$\begin{bmatrix} \begin{smallmatrix} M & A & M \\ O & A \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & 1 & O \end{smallmatrix} \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
Boston  Purpose of Disbursement	MA 02110-		309.27
credit card			
Candidate Name		Category/ Type	
·	ement For:		CREDIT CARD
Senate President	Primary General Other (specify) ▼		-
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	409.26

В.

C.

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 31 / 48								
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		171GL 01740								
TI LIMIZED DISBOTISEMENTS	Detailed Summary Page	X 21b	22 23	24 25 26								
And Information and Otaton		27	28a 28b	28c 29 30b								
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name												
NAME OF COMMITTEE (In Full)	, решени											
Massachusetts Republican State Congres	sional Committee											
/												
Full Name (Last, First, Middle Initial) Konica Minolta Business Systems			Transaction ID Date of Disburs	: 00520.E12097 sement								
Mailing Address P.O. Box 7247-0322			04 M / 08 / Y 2010									
City Philadelphia	State Zip Code PA 19170-0322		Amount of Each Disbursement this Pe									
Purpose of Disbursement				767.91								
copier lease												
Candidate Name		Category/ Type										
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		COPIER LEASE									
Full Name (Last, First, Middle Initial)												
Magan Munson			Date of Disburs									
Mailing Address			04 / 0	O Î Y Ž O Ĭ O Y								
City	State Zip Code		Amount of Each	n Disbursement this Period								
Purpose of Disbursement reimbursement for parking food travel cell phone	Г	• •		153.05								
Candidate Name		Category/ Type										
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)		REIMBURSEN FOOD TRAVE	MENT FOR PARKING EL CELL PHONE								
Full Name (Last, First, Middle Initial)			Transaction ID	: 00520.E12147								
Magan Munson			Date of Disburs	•••								
Mailing Address			04 / 2	25 Y 2010								
City	State Zip Code		Amount of Each	n Disbursement this Period								
Purpose of Disbursement				152.00								
reimbursement parking food travelcell phone												
Candidate Name	C	Category/ Type										
Senate President	ement For: Primary General Other (specify)		REIMBURSEN TRAVELCELL	MENT PARKING FOOD PHONE								
State: District:												
SUBTOTAL of Disbursements This Page (optional)		<b>•</b>		1072.96								

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LIN			R:	PAGE 32 / 48						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(check of 21b 27		e) 22 28a	_	23 28b	24		25 29	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			ny persor	n for th	he pu	rpose	of so	oliciting of	ontril	butions			
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congress	ional Committee												
/	monar committee												
Full Name (Last, First, Middle Initial) Jennifer Nassour				Transaction ID: 00520.E12165 Date of Disbursement									
Mailing Address 49 Chelsea St., Unit C1-3	307				$\begin{bmatrix} 0 & 4 & M & / & D & 0 & 1 \\ 0 & 4 & M & / & D & 0 & 1 \end{bmatrix} \begin{bmatrix} 1 & 1 & 1 & 1 & 1 \\ 1 & 2 & 0 & 1 & 0 & 1 \\ 1 & 2 & 0 & 1 & 0 & 1 \end{bmatrix}$								
,	State Zip Code MA 02129-			<i>A</i>	Amou	nt of	Each	Disburs	-		-		
Purpose of Disbursement reimbursement for parking food travel									1	61.90			
Candidate Name			tegory/ ype										
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)			REIMBURSEMENT FOR PARKIN FOOD TRAVEL							ING		
Full Name (Last, First, Middle Initial)				т	rans	actio	n ID:	0052	0 F1	2149			
Jennifer Nassour								ement					
Mailing Address 49 Chelsea St., Unit C1-3	307				0 <sup>M</sup> 4	M /	۵	8 /	Ý Ž	0 1 C	Y		
,	State Zip Code MA 02129-			<i>I</i>	Amou	nt of	Each	Disburs	emer	nt this F	Period		
Purpose of Disbursement				T I		0			1	73.23			
reimbursement for parking food and travel Candidate Name			tegory/ ype										
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)			R F	REIMI	BUR ) AN	SEM D TF	IENT F RAVEL	OR I	PARK	ING		
Full Name (Last, First, Middle Initial)				т	rans	actio	n ID:	0052	0.E1	2123			
Jennifer Nassour						_		ement	V .	/ * V *	V		
Mailing Address 49 Chelsea St., Unit C1-3	307				0 <sup>M</sup> 4	M /	<sup>D</sup> 2	8 /	` 2	0 1 (	)		
	State Zip Code MA 02129-			A	Amou	nt of	Each	Disburs	-		-		
Purpose of Disbursement reimbursement see below									2	275.28			
Candidate Name			tegory/ ype										
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	REIMBURSEMENT SEE BE						BELO	W				
State: District:	(-p)/ <b>V</b>												
SUBTOTAL of Disbursements This Page (optional) .			▶						6	10.41			

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		PR LINE NUMBER: PAGE 33 / 46 neck only one)						48					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	<u> </u>	22 28a	23 28b	, F	24 28c		25 29	26 30b				
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		y any perso		the pu	rpose of	sol	iciting co		outions					
NAME OF COMMITTEE (In Full)														
Massachusetts Republican State Congress	sional Committee													
Full Name (Last, First, Middle Initial) Verizon Verizon Wireless				Date of	saction I of Disbur	ser	ment	.E1	2150					
Mailing Address PO Box 5029				0 4 M / D 2 8 / Y 2 0 1 0 Y										
City Wallingford	State Zip Code CT 06492-			Amount of Each Disbursement this Period										
Purpose of Disbursement	I		П					_2	75.28					
reimbursement for J. NAssour for cell phone Candidate Name		Category/ Type												
Office Sought: House Disburse Senate President State: District:	ement For:  Primary  General  Other (specify)	. , , , ,	MEMO: REIMBURSEMENT FOR J. NASSOUR FOR CELL PHONE							R NE				
Full Name (Last, First, Middle Initial)														
Ox-Eye Properties				Date	saction II of Disbur	ser				V				
Mailing Address c/o Massey & Co. 85 Merrimac Street				0 4		0	1 ' [	2	0 Ĭ (	)				
,	State Zip Code MA 02114-			Amou	ınt of Ead	ch [	Disburse		•	-				
Purpose of Disbursement Rent & Utilities				L				46	92.24					
Candidate Name		Category/ Type												
Senate President	ement For: Primary General Other (specify)			RENT	Γ & UTII	LIT	IES							
Full Name (Last, First, Middle Initial) Paychex/InterPay				Date	saction II of Disbur	ser	ment							
Mailing Address PO Box 8295				0 <sup>M</sup> 4	M / C	0	1 /	ž	0 i (	)				
City Boston	State Zip Code MA 02266-			Amou	ınt of Ead	ch [	Disburse			-				
Purpose of Disbursement payroll tax				L.		0		37	72.46					
Candidate Name		Category/ Type												
Senate President	ement For: Primary General Other (specify)			PAYF	ROLL TA	٩X								
State: District:														
SUBTOTAL of Disbursements This Page (optional)		<b>)</b>	<u>.</u>					840	64.70					

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		LINE NUMBER: PAGE 34 / 48 ck only one)						48				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	 21b 27	П	22 28a	23 28b	, [	24 28c	П	25 29	26 30b			
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		ny perso		the pu	rpose of	so	liciting co		outions				
NAME OF COMMITTEE (In Full)													
Massachusetts Republican State Congress	sional Committee												
Full Name (Last, First, Middle Initial) Paychex/InterPay					saction I			.E1	2068				
Mailing Address PO Box 8295				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$									
City Boston	State Zip Code MA 02266-			Amou	ınt of Ead	ch I	Disburse	men	t this f	Period			
Purpose of Disbursement	02200°								77.02				
payroll fee Candidate Name		tegory/ Type											
Office Sought:    House   Disburse     Senate   President     State: District:	ment For: Primary General Other (specify)		PAYROLL FEE										
Full Name (Last, First, Middle Initial)				<b>T</b>		_	00500		0070				
Paychex/InterPay				Date	saction II of Disbur	se	ment			V			
Mailing Address PO Box 8295			04 / 15 / 2010						)				
City Boston	State Zip Code MA 02266-			Amou	ınt of Ead	ch I	Disburse	men	t this f	Period			
Purpose of Disbursement payroll tax								42	12.45	5			
Candidate Name		tegory/ Type											
Office Sought:    House   Disburse     Senate     President     State: District:	ment For: Primary General Other (specify)			PAYF	ROLL TA	٩X							
Full Name (Last, First, Middle Initial)							20500		0075				
Paychex/InterPay				Date	saction II of Disbur	se	ment						
Mailing Address PO Box 8295				0 <sup>M</sup> 4	M / C	1	5 /	ž	0 i 0	)			
City Boston	State Zip Code MA 02266-			Amou	ınt of Ead	ch I	Disburse						
Purpose of Disbursement payroll fee		•	79.88							3			
Candidate Name		tegory/ Type											
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	PAYROLL FEE											
State: District:	• • • •												
SUBTOTAL of Disbursements This Page (optional)		 ▶						430	69.35				

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 35 / 48
ITEMIZED DISBURSEMENTS	for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
Massachusetts Republican State Congress	sional Committee		
Full Name (Last, First, Middle Initial) Paychex/InterPay			<b>Transaction ID:</b> 00520.E12082 Date of Disbursement
Mailing Address PO Box 8295			$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Boston	State Zip Code MA 02266-		Amount of Each Disbursement this Period
Purpose of Disbursement payroll fee		· · ·	90.43
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		PAYROLL FEE
State: District:			
Full Name (Last, First, Middle Initial) Paychex/InterPay			Transaction ID: 00520.E12081 Date of Disbursement
Mailing Address PO Box 8295			$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Boston	State Zip Code MA 02266-		Amount of Each Disbursement this Period
Purpose of Disbursement			5346.97
payroll tax Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	7,	PAYROLL TAX
State: District:			
Full Name (Last, First, Middle Initial) Poland Spring Poland Spring			<b>Transaction ID:</b> 00520.E12116 Date of Disbursement
Mailing Address Processing Center PO Box 52271			$\begin{bmatrix} M & M & M \\ 0 & 4 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 2 & 8 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code AZ 85072-		Amount of Each Disbursement this Period
Purpose of Disbursement bottled water			58.51
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		BOTTLED WATER
State: District:			
SURTOTAL of Dishursements This Page (ontional)			5495.91

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE		PAGE 36 / 48	
ITEMIZED DISBURSEMENTS		(check only 21b	one) 7 22	24 25 26	
	Detailed Summary Page	27	28a 28b	28c 29 30b	
Any Information copied from such Reports and Statem					
or for commercial purposes, other than using the name  NAME OF COMMITTEE (In Full)	e and address of any political col	mmittee to soil	cit contributions from s	such committee	
Massachusetts Republican State Congress	sional Committee				
Full Name (Last, First, Middle Initial) Boston Postmaster			Transaction ID: 00520.E12152 Date of Disbursement		
Mailing Address JW MCCORMACK STATION New Chardon Street			$\begin{bmatrix} 0 & 4 & M & / & 2 & 8 \end{bmatrix}$	2010	
City	State Zip Code MA 02114-		Amount of Each Dis	bursement this Period	
Purpose of Disbursement non fea party related postage				1760.00	
Candidate Name		Category/ Type			
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		NON FEA PARTY TAGE	RELATED POS-	
Full Name (Last, First, Middle Initial) Boston Postmaster			Transaction ID: 00520.E12113 Date of Disbursement		
Mailing Address JW MCCORMACK STATION New Chardon Street			04 7 28 7 2010		
City	State Zip Code MA 02114-		Amount of Each Dis	bursement this Period	
Purpose of Disbursement non FEA party related postage				500.00	
Candidate Name		Category/ Type			
Senate President	ment For: Primary General Other (specify) ▼		NON FEA PARTY TAGE	RELATED POS-	
State: District:					
Full Name (Last, First, Middle Initial) Sprint/Nextel			Transaction ID: 00520.E12121 Date of Disbursement  M M M D D B V Y Y O Y O Y O Y O O O O O O O O O O O		
Mailing Address PO Box 17990					
Denver	State Zip Code CO 80217-		Amount of Each Dis	bursement this Period 78.18	
Purpose of Disbursement cell phone				76.16	
Candidate Name		Category/ Type			
Office Sought: House Senate President State: District:	ment For: Primary General Other (specify)		CELL PHONE		
SUBTOTAL of Disbursements This Page (optional) .				2338.18	
TOTAL This Period (last page this line number only)					

В.

C.

SCHEDULE B (FEC Form 3X)	Lies servets selectivis(s)	FOR LINE	NUMBER:		PA	GE	37 / 4	48
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	<u> </u>					_
	Detailed Summary Page	X 21b 27	22 28a	23 28b	24 28c	Н	25 29	26 30b
Any Information copied from such Reports and Staten	lents may not be sold or used l					ntrib		
or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full)								
Massachusetts Republican State Congress	sional Committee							
Full Name (Last, First, Middle Initial) Staples, Inc.			Transacti Date of D			.E12	2119	
Mailing Address Staples Credit Plan Dept. 80 - 0088936796			04	<sup>D</sup> 2	8 / 1	ž	0 i c	) <sup>Y</sup>
City Des Moines	State Zip Code IA 50368-9020		Amount o	f Each	Disburse	ment	this F	Period
Purpose of Disbursement office supplies						7	53.36	3
Candidate Name		Category/ Type						
Senate President	ement For: Primary General Other (specify)	Nes	OFFICE	SUPP	LIES			
State: District:								
Full Name (Last, First, Middle Initial) Direct Mail Systems			Transacti Date of D	isburse	ment			_
Mailing Address 12450 Automobile Boule	vard		0 4	0	8 / 5	ž	0 i c	) <sup>Y</sup>
City Clearwater	State Zip Code FL 33762-		Amount o	f Each	Disburse			
Purpose of Disbursement direct mail -party related non FEA						109	95.00	)
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		DIRECT NON FE	MAIL -	-PARTY	' RE	LATE	ΞD
Full Name (Last, First, Middle Initial) Direct Mail Systems			Transacti Date of D	-		.E12	2162	
Mailing Address 12450 Automobile Boule	vard		0 4 M	0	8 / 3	Ž	0 i c	) <sup>Y</sup>
City Clearwater	State Zip Code FL 33762-		Amount o	f Each	Disburse	ment	this F	Period
Purpose of Disbursement direct mail party related non FEA						109	95.00	)
Candidate Name		Category/ Type						
Office Sought:  Senate President  State:  Disburse  Disburse  District:	ement For: Primary General Other (specify)		DIRECT NON FE		PARTY	REI	ATE	D
SUBTOTAL of Disbursements This Page (optional)		<b>b</b>				294	13.36	
TOTAL This Period (last page this line number only)		<b>&gt;</b>						

IT				E NUMBER: PAGE 38 / 48									
	For each categor Detailed Summa			(ch	eck only 21b 27	one) 22 28a		23 28b	F	24 28c	F	25 29	26
	ny Information copied from such Reports and Statem for commercial purposes, other than using the nam												
	NAME OF COMMITTEE (In Full)	o and address of any politica	. 0011		10 50	IIOIL COITE	ioul	ioi io II	· UI	ii SuCII	JUIII	muce	
	Massachusetts Republican State Congress	sional Committee											
<b>4</b> .	Full Name (Last, First, Middle Initial) Verizon							isburs	er		).E1	2108	}
	Mailing Address P.O. Box 1					0 <sup>M</sup> 4	М	/ D	1 !	5 /	Y 2	2 0 1	0 <sup>Y</sup>
	City Worcester	State Zip Code MA 01654-				Amou	ınt c	f Eacl	h [	Disburs	-		
	Purpose of Disbursement Office phone					L.	-		•	•	. (	643.2	1
	Candidate Name			ateg Typ	,								
	Senate President	ement For: Primary General Other (specify)				OFFI	CE	PHO	N	E			
_	State: District:												
3.	Full Name (Last, First, Middle Initial) William Walker					Date	of D	isburs	er				
	Mailing Address 5 Charter St.					o <sup>M</sup> 4	М	/ D	0 8	B /	Y 2	2 0 1	0 <sup>Y</sup>
	City Boston	State Zip Code MA 02113-				Amou	ınt c	f Eacl	h [	Disburs	emer		
	Purpose of Disbursement Reimbursement for parking food travel		Г					-				62.0	Ü
	Candidate Name		С	ateg Typ									
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)				REIM FOOI	IBU D T	RSE! RAVI	ME EL	ENT F	OR	PAR	KING
 C.	Full Name (Last, First, Middle Initial) William Walker							ion ID		00520 ment	).E1	2128	<b>;</b>
	Mailing Address 5 Charter St.					0 <sup>M</sup> 4	М	/ D	0 8	B /	Y	2 0 1	0 <sup>Y</sup>
	City Boston	State Zip Code MA 02113-				Amou	ınt c	f Eacl	h [	Disburs	emer	nt this	Period
	Purpose of Disbursement reimbursement for parkingfoodtravel					L.				•		200.00	0
	Candidate Name			ateg Typ									
	Senate President	ement For: Primary General Other (specify)				REIM FOOI	IBU DTF	RSEI RAVE	ME L	ENT F	OR	PAR	KING-
Г	State: District:						_		_		_		
s	SUBTOTAL of Disbursements This Page (optional)	······			<u> </u>	L.					9	05.2	1

_	ALIEBULE BYEEGE AND													
	CHEDULE B (FEC Form 3X)	Use separate schedule(			R LIN	 UMBE	R:			PA	GĒ	39 / 4	18	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X	21b 27	22 28a	П	23 28b		24 28c		25 29		26 30b
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam													
$\overline{\ }$	NAME OF COMMITTEE (In Full)													
/	Massachusetts Republican State Congres	sional Committee												
	Full Name (Last, First, Middle Initial)					Trans	actio	on ID:	0	0520.	E12	2126		
	William Walker							sburse		-				
	Mailing Address 5 Charter St.					0 <sup>M</sup> 4	M /	0	8	/ Y	ž	0 Í 0	Y	
	City	State Zip Code				Amou	nt of	Each	Dis	burser	nent	this F	eric	od
	Boston	MA 02113-					-				4.	70.70		
	Purpose of Disbursement				•						, I.	70.73	_	
	Reimbursement for parkingfood travelphone		4 4											
	Candidate Name		'	ateg Typ	•									
	Office Sought: House Disburs	ement For:				REIM	RHF	RSEM	1EN	T FO	RF	ΔRK	INIC	à-
	Senate	Primary Genera	ıl			FÖÖ	Ď ŤĖ	RAVE	ĽPi	HONE	<u> </u>	/ \li \li \		4
	President	Other (specify)												
	State: District:													

		170.73
SUBTOTAL of Disbursements This Page (optional)		170.73
TOTAL This Period (last page this line number only)	•	63646.73

<b>FEMIZED DISBURSEMENTS</b>		s) Check of	nly one)
	for each category of the Detailed Summary Page	21b	22 23 24 25 28a 28b 28c 29 X
ny Information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any polition		
Massachusetts Republican State Con	gressional Committee		
Full Name (Last, First, Middle Initial) Nick Connors			Transaction ID: 00520.E12062 Date of Disbursement  0 4
Mailing Address 74 Green Street			04 01 2010
City Stoneham	State Zip Code MA 02180-		Amount of Each Disbursement this Period
Purpose of Disbursement payroll			1941.42
Candidate Name		Category/ Type	
Office Sought: House Dis Senate President State: District:	sbursement For: Primary Genera Other (specify)	l	PAYROLL
Full Name (Last, First, Middle Initial) Nick Connors			Transaction ID: 00520.E12071 Date of Disbursement
Mailing Address 74 Green Street			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Stoneham	State Zip Code MA 02180-		Amount of Each Disbursement this Perio
Purpose of Disbursement payroll			1941.42
Candidate Name		Category/ Type	
Office Sought: House Senate President State: District:	sbursement For:  Primary Genera  Other (specify) ▼	ı	PAYROLL
Full Name (Last, First, Middle Initial) Nick Connors			Transaction ID: 00520.E12086 Date of Disbursement
Mailing Address 74 Green Street			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Stoneham	State Zip Code MA 02180-		Amount of Each Disbursement this Perio
Purpose of Disbursement payroll  Candidate Name		Cotomori	1941.42
		Category/ Type	
Office Sought: House Dis Senate President State: District:	sbursement For:  Primary Genera  Other (specify) ▼	ıl	PAYROLL
Giale. DISHIGH.			

		Use separate schedule(	s)		NE NUMBER: PAGE 41 / 48 only one)
	IIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 23 24 25 28c 28c 29 X
or for co	ommercial purposes, other than using the r				on for the purpose of soliciting contributions a solicit contributions from such committee
\	ME OF COMMITTEE (In Full) ssachusetts Republican State Congr	ressional Committee			
	Name (Last, First, Middle Initial) rah Donoghue				Transaction ID: 00520.E12063 Date of Disbursement
Mail	ling Address 3 Main Street				04 01 7 2010
City	ver	State Zip Code MA 02030-			Amount of Each Disbursement this Perio
payı					1547.28
	ndidate Name  ce Sought: House Disb	ursement For:		ategory/ Type	
Stat	Senate President	Primary Genera Other (specify) ▼			PAYROLL
Full	Name (Last, First, Middle Initial) rah Donoghue				Transaction ID: 00520.E12072 Date of Disbursement
Mail	ling Address 3 Main Street				04
City		State Zip Code MA 02030-			Amount of Each Disbursement this Period
payı					1547.28
	ndidate Name			ategory/ Type	
Offi Stat	Senate President	ursement For:  Primary Genera  Other (specify) ▼			PAYROLL
Full	Name (Last, First, Middle Initial) rah Donoghue				Transaction ID: 00520.E12088 Date of Disbursement
Mail	ling Address 3 Main Street				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City		State Zip Code MA 02030-			Amount of Each Disbursement this Perio
payi	pose of Disbursement roll ndidate Name			ategory/	1547.28
		ursement For:		Type	
Stat	Senate President	Primary Genera Other (specify) ▼	l		PAYROLL
					4641.84

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.    NAME OF COMMITTEE (in Full)   Massachusetts Republican State Congressional Committee    Full Name (Last, First, Middle Initial)   Kaitlyn Greeley   Mailing Address   34 Fresno St.			Use separate schedule			)K LINE neck only		• • •		L	17.02	42/	<del>1</del> 0
NAME OF COMMITTEE (in Full)  NAME OF COMMITTEE (in Full)  Massachusetts Republican State Congressional Committee  Full Name (Last, First, Middle Initial)  Kaitlyn Greeley  Mailing Address 34 Fresno St.  City Boston  Purpose of Disbursement  Payroll  Candidate Name  Office Sought: House President  State: District:  Full Name (Last, First, Middle Initial)  Kaitlyn Greeley  Office Sought: House President  State: District:  Full Name (Last, First, Middle Initial)  Kaitlyn Greeley  Mailing Address 34 Fresno St.  City Boston  Office Sought: House President  State: District:  Full Name (Last, First, Middle Initial)  Kaitlyn Greeley  Mailing Address 34 Fresno St.  City Boston  MA 02131-  Purpose of Disbursement  Purpose of Disbursement  District:  Full Name (Last, First, Middle Initial)  Kaitlyn Greeley  Mailing Address 34 Fresno St.  City Boston  Office Sought: House President  State: Disbursement For: Purpose of Disbursement  Purpose of Disbursement  District:  Full Name (Last, First, Middle Initial)  Kirsten Hughes  Mailing Address 72 Davis Street  City City Quincy  MA 02170-  Purpose of Disbursement  District:  Full Name (Last, First, Middle Initial)  Kirsten Hughes  Mailing Address 72 Davis Street  City City Quincy  MA 02170-  Purpose of Disbursement  Disbursement in Transaction ID: 00520.E120  Date of Disbursement in Transaction ID: 00520.E120  Date			Detailed Summary Pag	÷	È	21b 27	22 28a	口	28b	2	3c	25 29	X
Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Mailing Address 34 Fresno St.  City Boston  Mailing Address  Office Sought:  District:  Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Mailing Address  Afresno St.  City Boston  Office Sought:  District:  Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Mailing Address  Afresno St.  City Boston  Office Sought:  Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Mailing Address  Afresno St.  City Boston  Office Sought:  District:  Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Amount of Each Disbursement For:  Date of Disbursement Initial  Office Sought:  District:  Full Name (Last, First, Middle Initial) Cardidate Name  Office Sought:  District:  Full Name (Last, First, Middle Initial) Cardidate Name  Disbursement For:  Senate  President  Other (specify)  Other (specify)  Type  Office Sought:  Amount of Each Disbursement For:  Date of Disbursement Initial  Other (specify)  Type  Office Sought:  Amount of Each Disbursement Initial  Other (specify)  Transaction ID: 00520.E120  Date of Disbursement Initial  Amount of Each Disbursement Initial  Other (specify)  Transaction ID: 00520.E120  Date of Disbursement Initial  Other (specify)  Other (specify)  Transaction ID: 00520.E120  Date of Disbursement Initial  Other (specify)  Transaction ID: 00520.E120  Date of Disbursement Initial  Other (specify)  Transaction ID: 00520.E120  Date of Disbursement Initial  Other (specify)  Transaction ID: 00520.E120  Date of Disbursement Initial  Other (specify)  Transaction ID: 00520.E120  Date of Disbursement Initial  Other (specify)  Transaction ID: 00520.E120  Date of Disbursement Initial  Other (specify)  Transaction ID: 00520.E120  Date of Disbursement Initial  Other (specify)  Transaction ID: 00520.E120  Date of Disbursement Initial  Other (specify)  Transaction ID: 00520.E120  Date of Disbursement Initial  Other (specify)  Transaction ID: 00520.E120  Date of Disbursement Initial  Other (specify)  Transaction ID: 00520.E120  Date of Di	or fo	or commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)	ne and address of any politi										3
Mailing Address 34 Fresno St.  City State Zip Code Boston MA 02131- Purpose of Disbursement payroll Category/ Type  Office Sought: House Persident State: District:  Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Office Sought: House Boston MA 02131-  Purpose of Disbursement For: Senate Persident State: District:  Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Office Sought: House Boston MA 02131-  Purpose of Disbursement payroll Candidate Name  Office Sought: House Disbursement For: Senate Persident State: District:  Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Office Sought: House Disbursement For: Senate Perimary General Other (specify) ▼  Office Sought: Tansaction ID: 00520.E120 Date of Disbursement ID: 0	<u>/_</u>	Massachusetts Republican State Congres	ssional Committee										
City State Zip Code MA 02131-  Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Office Sought: Disbursement Primary General Primary General President State: District:  Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Mailing Address 34 Fresno St.  City State Zip Code MA 02131-  Purpose of Disbursement Por: Disbursement For: Date of Disbursement In		Kaitlyn Greeley					Date of	of Dis	sburse	ement			Y
Boston MA 02131- Purpose of Disbursement payroll Candidate Name    Disbursement For:		Mailing Address 34 Fresno St.					0 4		Ų		4	2010	,
Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Mailing Address 72 Davis Street  City Other (specify)  Full Name (Last, First, Middle Initial) Candidate Name  Disbursement District:  Full Name (Last, First, Middle Initial) Candidate Name  Disbursement Disbursement District:  Full Name (Last, First, Middle Initial) Candidate Name  Disbursement For: Primary Disbursement For: Primary Category' Type  Disbursement District:  Full Name (Last, First, Middle Initial) Kirsten Hughes  Mailing Address 72 Davis Street  City Cuincy Purpose of Disbursement Disbursement Disbursement District:  Full Name (Last, First, Middle Initial) Candidate Name  Disbursement District:  Full Name (Last, First, Middle Initial) Category' Type  Disbursement District:  Full Name (Last, First, Middle Initial) Category' Type  Disbursement District:  Full Name (Last, First, Middle Initial) Category' Type  Disbursement District:  Full Name (Last, First, Middle Initial) Category' Type  Disbursement District:  Full Name (Last, First, Middle Initial) Category' Type  Disbursement District:  Full Name (Last, First, Middle Initial) Category' Type  Disbursement District:  Full Name (Last, First, Middle Initial) Category' Type  Disbursement District:  Full Name (Last, First, Middle Initial) Category' Type  Disbursement For:  District  Dis							Amou	int of	Each	Disbu	rseme	nt this f	Perio
Office Sought: House Senate Primary General Disbursement Date of Disbursement Mailing Address 34 Fresno St.  City State Zip Code MA 02131-Purpose of Disbursement Boston MA 02131-Purpose of Disbursement Disbursement For: Senate Primary General Disbursement Date of Date of Disbursement Date of D		·									10	032.34	
Senate President Other (specify) ▼  Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Mailing Address 34 Fresno St.  City State Zip Code MA 02131-  Purpose of Disbursement payroll  Candidate Name  Office Sought: House Primary General Other (specify) ▼  Senate Primary Date of Disbursement In Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Kirsten Hughes  Mailing Address 72 Davis Street  City State Zip Code General Other (specify) ▼  Transaction ID: 00520.E120 Date of Disbursement For: Date of Disbursement In		Candidate Name		C									
Full Name (Last, First, Middle Initial) Kaitlyn Greeley  Mailing Address 34 Fresno St.  City State Zip Code Boston MA 02131- Purpose of Disbursement payroll Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) Kirsten Hughes  Mailing Address 72 Davis Street  City State Zip Code Other (specify) ▼  Category/ Type  Other (specify) ▼  Category/ Type  PAYROLL  Transaction ID: 00520.E120 Date of Disbursement the Date of Date of Disbursement the Date of Da		Senate President	Primary Genera	ı I			PAYF	ROLI	-				
City State Zip Code MA 02131-  Purpose of Disbursement payroll  Candidate Name  Office Sought: House Senate Primary General President State: District:  Full Name (Last, First, Middle Initial) Kirsten Hughes  Mailing Address 72 Davis Street  City State Zip Code MA 02170-  City State Zip Code MA 02170-  Purpose of Disbursement payroll Candidate Name  Category/ Type  PAYROLL  Amount of Each Disbursement the state of Disbursement For:  Disbursement For:  Mailing Address 72 Davis Street  City State Zip Code MA 02170-  Purpose of Disbursement payroll Candidate Name  Category/ Type  Disbursement For:  Disbursement For:  DayROLL		Full Name (Last, First, Middle Initial)									20.E1	2073	
Boston MA 02131-  Purpose of Disbursement payroll  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Kirsten Hughes  Mailing Address 72 Davis Street  City State Zip Code Quincy MA 02170-  Purpose of Disbursement payroll  Candidate Name  Office Sought: House Disbursement For:  PAYROLL  Transaction ID: 00520.E120 Date of Disbursement to 04 M / D D D / Y Z D D D D / Y Z D D D D D D D D D D D D D D D D D D		Mailing Address 34 Fresno St.						M /	<sup>D</sup> 1	5 <sup>/</sup>	Y	ž o ž o	) <sup>Y</sup>
Cardidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Kirsten Hughes  Mailing Address 72 Davis Street  City State Zip Code Quincy MA 02170-  Purpose of Disbursement payroll  Candidate Name  Category/ Type  Amount of Each Disbursement to 1092  Amount of Each Disbursement to 1092  Category/ Type  Office Sought: House Disbursement For:			•				Amou	int of	Each	Disbu	rseme	nt this f	Perio
Office Sought: House Senate Primary General Disbursement ID: 00520.E120 Date of Disbursement Date of Disbursement ID: 00520.E120 Date of Disbursement ID:		•							-	-	1(	)32.32	2
Senate		Candidate Name		C	_	-							
Kirsten Hughes  Mailing Address 72 Davis Street  City State Zip Code Quincy MA 02170-  Purpose of Disbursement payroll  Candidate Name  Category/ Type  Office Sought: House Disbursement For:		Senate President	Primary Genera	ı I			PAYF	ROLI	_				
Mailing Address 72 Davis Street  City State Zip Code Quincy MA 02170-  Purpose of Disbursement payroll  Candidate Name Category/ Type  Office Sought: House Disbursement For:		,					Date	of Dis	sburse	ement			
Quincy MA 02170-  Purpose of Disbursement payroll  Candidate Name  Category/ Type  Office Sought: House Disbursement For:		Mailing Address 72 Davis Street						М /			2	ž o ž o	) <sup>Y</sup>
payroll  Candidate Name  Category/ Type  Office Sought: House Disbursement For:							Amou	int of	Each	Disbu	rseme	nt this f	Perio
Office Sought: Disbursement For:		payroll									10	)92.56	5
Ι Π Π Ι ΡΔΥΒΟΙΙ		Candidate Name		C									
President Other (specify) ▼ State: District:		Senate President	Primary Genera	 I			PAYF	ROLI	-				
		Oldio. District.							•			57.22	

ITI	HEDULE B (FEC Form 3X)	Use sep	arate schedule(s)		NUMBER: PAGE 43 / 48
_	EMIZED DISBURSEMENTS		category of the Summary Page	(check onl)	22 23 24 25 2 28a 28b 28c 29 X
	Information copied from such Reports and Staten or commercial purposes, other than using the nam				
ı \	NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congres	sional Cor	mmittee		
	Full Name (Last, First, Middle Initial) Kirsten Hughes				Transaction ID: 00520.E12074 Date of Disbursement
	Mailing Address 72 Davis Street				04
	City Quincy	State MA	Zip Code 02170-		Amount of Each Disbursement this Period
	Purpose of Disbursement payroll				1092.56
	Candidate Name  Office Sought: House Disburse	ement For:		Category/ Type	
	Senate President	Primary Other (sp	General ecify) ▼		PAYROLL
	State: District:  Full Name (Last, First, Middle Initial)  Kirsten Hughes				Transaction ID: 00520.E12089 Date of Disbursement
	Mailing Address 72 Davis Street				0 4 2 9 7 2 0 1 0
	City Quincy	State MA	Zip Code 02170-		Amount of Each Disbursement this Period
	Purpose of Disbursement payroll				1092.58
	Candidate Name			Category/ Type	
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (sp	General ecify) ▼		PAYROLL
	Full Name (Last, First, Middle Initial) Magan Munson				Transaction ID: 00520.E12066 Date of Disbursement
					$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} $
	Mailing Address				
		State	Zip Code		
	City  Purpose of Disbursement payroll	State	Zip Code		Amount of Each Disbursement this Period
	City Purpose of Disbursement payroll Candidate Name		Zip Code	Category/ Type	
	City Purpose of Disbursement payroll Candidate Name	State  ement For: Primary Other (spr	General		Amount of Each Disbursement this Period 1222.89  PAYROLL

	Use separate schedule(s)	(check onl		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28a 28b 28c 29	X
Any Information copied from such Reports and State or for commercial purposes, other than using the r				
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congr	ressional Committee			
Full Name (Last, First, Middle Initial) Magan Munson			Transaction ID: 00520.E12078 Date of Disbursement	
Mailing Address			04 M / D 15 / Y 2010	Y
City	State Zip Code		Amount of Each Disbursement this P	
Purpose of Disbursement payroll			1222.89	
Candidate Name	ursement For:	Category/ Type		
Office Sought: House Disbrict: District:	Primary General Other (specify)		PAYROLL	
Full Name (Last, First, Middle Initial) Magan Munson			Transaction ID: 00520.E12085 Date of Disbursement	
Mailing Address			0 4 Događanam	Y
City	State Zip Code		Amount of Each Disbursement this P	erio
Purpose of Disbursement payroll			1222.89	
Candidate Name		Category/ Type		
Office Sought: House Disbrict: District:	ursement For:  Primary General  Other (specify) ▼		PAYROLL	
Full Name (Last, First, Middle Initial) Michael Rigais			Transaction ID: 00520.E12080 Date of Disbursement	_
Mailing Address 24 Concord Ave, Apt	415		04 04 7 015 7 2010	Y
City Cambridge	State Zip Code MA 02138-		Amount of Each Disbursement this P	-
Purpose of Disbursement payroll Candidate Name		Category/	820.66	
	ursement For: Primary General Other (specify)	Туре	PAYROLL	
olaid. Diallict.				_

TELLIZED DISCUSSION	Use separate schedule	(S)   (chack o	NE NUMBER:  PAGE 45 / 48  only one)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag	e 21b	22 23 24 25 28 28b 28c 29 X
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congre	essional Committee		
Full Name (Last, First, Middle Initial) Michael Rigais			Transaction ID: 00520.E12087 Date of Disbursement
Mailing Address 24 Concord Ave, Apt 4	15		04 M / D2 B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Cambridge	State Zip Code MA 02138-		Amount of Each Disbursement this Perio
Purpose of Disbursement payroll Candidate Name			1523.40
	rsement For:	Category/ Type	
Senate President State: District:	Primary General Other (specify)	al	PAYROLL
Full Name (Last, First, Middle Initial) William Walker			Transaction ID: 00520.E12067 Date of Disbursement
Mailing Address 5 Charter St.			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Boston	State Zip Code MA 02113-		Amount of Each Disbursement this Perio
Purpose of Disbursement payroll			1418.14
Candidate Name		Category/ Type	
Office Sought: House Disbut Senate President State: District:	rsement For: Primary General Other (specify)	al	PAYROLL
Full Name (Last, First, Middle Initial) William Walker			Transaction ID: 00520.E12079 Date of Disbursement
Mailing Address 5 Charter St.			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Boston	State Zip Code MA 02113-		Amount of Each Disbursement this Perio
Purpose of Disbursement payroll Candidate Name		Category/	1418.13
	rsement For:	Type	
Senate President State: District:	Primary General Other (specify)	al	PAYROLL
			4359.67

SCHEDULE B (FEC Form 3X)	Haramanaha sahadi U.C.	FOR LINE NUMBER:	PAGE 46/48
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 21b 22 2 27 28a	23 24 25 26 28b 28c 29 X 30b
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name			•
NAME OF COMMITTEE (In Full)			
Massachusetts Republican State Congressi	onal Committee		
Full Name (Last, First, Middle Initial)		Transac	etion ID: 00520.E12083
William Walker		Date of I	Disbursement
Mailing Address 5 Charter St.		0 4	D 2 9 Y 2 0 1 0 Y
,	State Zip Code MA 02113-	Amount	of Each Disbursement this Period
Purpose of Disbursement payroll	Г		1418.14
Candidate Name		Category/ Type	
	nent For: Primary General Other (specify)	PAYRO	LL
State: District:	• • •		

SUBTOTAL of Disbursements This Page (optional)	•	1418.14
TOTAL This Period (last page this line number only)	<b>•</b>	26075.60

### PAGE 47 / 48 SCHEDULE D (FEC Form 3X) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for research party related Lexis-Nexis Mailing Address PO Box 7247-7090 City State ZIP Code Philadelphia PA 19170-Outstanding Balance Beginning This Period Transaction ID: LS90513.E11275 250.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 250.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for research Lexis-Nexis party related Mailing Address PO Box 7247-7090 ZIP Code City State Philadelphia PA 19170-Outstanding Balance Beginning This Period Transaction ID: LS90513.E11276 250.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 250.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for research Lexis-Nexis party related Mailing Address PO Box 7247-7090 State ZIP Code City Philadelphia PΑ 19170-Outstanding Balance Beginning This Period Transaction ID: LS90513.E11277 1250.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1250.00 1750.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

### PAGE 48 / 48 SCHEDULE D (FEC Form 3X) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each numbered line) (check only one) 9 X 10 **Excluding Loans** NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original Debt for telemar-keting non-fea party rela-ted **FLS Connect** Mailing Address 7300 Hudson Blvd. Ste ZIP Code City State Saint Paul MN 55128-Outstanding Balance Beginning This Period Transaction ID: LS91217.E11763 3910.20 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 3910.20 3910.20 1) SUBTOTALS This Period This Page (optional)..... 5660.20 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

5660.20